OP-21-12, "Prevention, Detection, and Response to Sexual Abuse/Sexual Harassment,"

# SCDC POLICY

Change 1 to OP-21.12: Attachment A; Attachment B

NUMBER: OP-21.12

TITLE: PREVENTION, DETECTION, AND RESPONSE TO SEXUAL ABUSE/SEXUAL HARASSMENT

ISSUE DATE: October 29, 2014

RESPONSIBLE AUTHORITY: DIVISION OF OPERATIONS

**OPERATIONS MANUAL: OPERATIONS** 

SUPERSEDES: OP-21.12 (August 1, 2011) (September 1, 2007)

RELEVANT SCDC FORMS/SUPPLIES: 18-78(New Form); 19-10; 19-29; Attachment A; Attachment B

ACA/CAC STANDARDS: 4-4281-1 through 4-4281-8 STATE/FEDERAL STATUTES: Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79); Section 44-23-1150, South Carolina Code of Laws, 1976, as amended.

PURPOSE: To provide guidelines to address the requirements of the Agency pursuant to the Prison Rape Elimination Act.

POLICY STATEMENT: Pursuant to the Prison Rape Elimination Act (PREA), the South Carolina Department of Corrections (SCDC) has a zero-tolerance policy regarding sexual abuse and sexual harassmentagainst inmates in correctional facilities, or patients confined in prisons or jails. The SCDC will identify and monitor those inmates who are vulnerable to sexual abuseand those who have a propensity to commit such acts and ensure that they are separated from each other. All persons who have contact with inmates will receive training on Agency sexual abuse and sexual harassment policies, including reporting procedures, the dynamics of sexual abuse in confinement, and how to detect and respond to signs of abuse. All inmates will receive orientation on their rights to be free from sexual abuse and sexual harassment and will be made aware of the procedures available to them for reporting acts of sexual abuse. The Agency will fully investigate all allegations and will take appropriate action pursuant to the outcome of the investigations.

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ATTACHMENT A

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# **SPECIFIC PROCEDURES:**

- 1. INMATE ORIENTATION, SCREENING AND ASSESSMENT: (4-4281-2)
- 1.1 As a part of the initial intake process at the Reception and Evaluation (R&E) Center, all inmates will receive a thorough orientation on the Agency's zero-tolerance policy regarding the sexual abuse ofinmates. The information will be provided in two stages: 1) intake education, which will be provided during the intake process (within 24 hours of the inmate's arrival) and will include an explanation of SCDC's zero-tolerance policy toward sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse or sexual harassment; and 2) comprehensive education which will be provided within two weeks of the inmate's arrival at R&E and will include, but is not limited to:
- •SCDC Policy OP-21.12, "Prevention, Detection, and Response to Sexual Abuse/Sexual Harassment;
- •Inmates' right to be free from sexual abuse and sexual harassment as well as retaliation for reporting such incidents;
- Prevention;

- •Tips for staying safe;
- •How to report incidents or suspicions of sexual abuse or sexual harassment;
- •SCDC's policies and procedures for responding to sexual abuse and sexual harassment, including the availability of treatment and counseling for victimized inmates; and
- •Disciplinary actions for intentionally making a false allegation.
- 1.1.1 The inmate education sessions will be facilitated by a staff member who is knowledgeable about the Agency's current policies and procedures addressing the sexual abuse of inmates and who has been trained on how to discuss sexual abuse and related sensitive topics with inmates.
- 1.1.2The information will be communicated in a manner that is clearly understood by the inmate; inmates will have the opportunity to ask questions during these presentations. Offenders will be required to sign an acknowledgement of having received this information at both the intake and comprehensive education sessions initial intake process and at all institutional orientations on SCDC Form 18-78, "Certification of Prison Rape Elimination Act (PREA) Orientation." A copy of the 18-78s will be maintained in the inmate's institutional record. (4-4281-1)
- 1.1.3 Inmate orientation and orientation materials will be provided in formats which are accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. (4-4281-1)
- 1.1.4 Inmates shall receive a brief refresher version of the information provided during comprehensive education sessions described in section 1.1 during all institutional orientations subsequent to that at the R&E Center (except 30-day program inmates at Watkins and Goodman). These sessions shall focus on educating inmates about relevant procedures to the extent that those of the inmate's new facility differ from those of the previous facility.
- 1.1.5 Current inmates who have not received the required education shall be educated as promptly as possible.
- 1.1.6 In addition to the education outlined above, each SCDC facility will ensure that key information, including information about the right to be free from sexual abuse and sexual harassment, and how to make a report, is continuously and readily available or visible to inmates through posters and other written formats.
- 2.STAFF TRAINING AND ORIENTATION: PREA training will be provided to all Agency staff, contractors, temporary/grant employees, and volunteers during the individual orientation programs as well as during mandatory in-service annual training. The training will include, but is not limited to:
- •Review of this policy, and other SCDC policy provisions pertaining to inmate sexual abuse and sexual harassment prevention, detection, reporting and response, and how staff are to fulfill their responsibilities under these policies and procedures;

- •The requirement that staff report immediately any knowledge or information regarding sexual abuse or sexual harassment: •Zero tolerance for the sexual abuse or sexual harassment of inmates; (4-4281-6) •Inmates' right to be free from sexual abuse and sexual harassment, and the right of inmates and staff to be free from retaliation for reporting such abuse; •The dynamics of sexual abuse and sexual harassment in confinement, recognition of signs of threatened and actual sexual abuse, common reactions of sexual abuse victims and sensitivity to inmate reports of sexual abuse, confidentiality, recognition of signs of predatory inmates and inmates who are vulnerable to sexual abuse: •How to avoid inappropriate relationships with inmates; and •How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. 2.1 Specialized Training may be provided for staff members who are likely first responders to incidents of sexual abuse or who will be charged with specific aspects of the Agency response to abuse allegations. This training may include, but is not limited to: crime scene management, elimination of contamination, evidence collection protocol, and crisis intervention. **3.REPORTING PROCEDURES:** 3.1Inmate Reporting Procedures: 3.1.1 Inmates incarcerated in an SCDC facility may report any act of sexualabuse by calling \*22, and/or by written or verbal reports to any Agency staff member, contract employee, volunteer, or the Division of Investigations, or SLED (address). The inmate can file a written report without giving his/her name or the name of the abuser(s). This information could also include an assault that occurred at any Correctional
- 3.1.2 A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. Any inmate conclusively found to have filed an intentional

Facility, Detention Center, County Facility or while under community supervision, prior to or during his/her

commitment to the SCDC. (4-4281-7)

ly false report alleging sexual abuse will be subject to disciplinary action through the Inmate Disciplinary System and/or criminal charges.

- 3.2Staff Reporting Procedures: Any employee, volunteer, agent, or contractor of the Agency who observes or receives information concerning sexual abuse, including threats of sexual abuse or a substantial risk of imminent sexual abuse, toward an inmate and/or any person presently under the jurisdiction of the Agency, must report it immediately to one of the following: Institutional Investigator, Warden of the institution, appropriate member of the Director's staff, Division Director of Human Resources, or the Inspector General. Visitors, volunteers, agents or contractors who fail to report any knowledge of sexual abuse towards an inmate may lose their privileges with the Agency, and may possibly face criminal charges.
- 3.2.1SCDC staff failure to report such information will result in corrective action up to, and including termination pursuant to SCDC Policy/Procedure ADM-11.04, "Employee Corrective Action." See SCDC Policy/Procedure ADM-11.17, "Employee Conduct," for additional information.
- 3.2.2Any employee, (to include contract and temporary) who knowingly or intentionally submits inaccurate or untruthful information concerning sexual abuse as defined by state statute is guilty of the misdemeanor of falsely reporting sexual abuse and, upon conviction, must be imprisoned for not more than one (1) year. In addition, such conduct will result in corrective action up to and including termination pursuant to SCDC Policy/Procedure ADM-11.04, "Employee Corrective Action."
- 3.2.3A person who has knowledge of, or has received information of, sexual abuse and fails to report it to the appropriate law enforcement authority, or a person who threatens or attempts to intimidate a witness is guilty of a misdemeanor and, upon conviction, must be fined not more than \$500.00 or imprisoned for not more than six (6) months, or both.
- 4.RETALIATION: No inmate will be subjected to retaliation, reprisal, harassment, or disciplinary action by employees, volunteers, or other inmates for reportingallegationsor knowledge of sexual abuse against an inmate. Inmates may report retaliation using any of the procedures for reporting sexual abuse, as described in Section 3.1. Allegations of reprisal may also be investigated by the Inspector General or Division of Investigations.
- 4.1 Employees will not be subjected to any kind of retaliation for reporting of any wrongdoings. Refer to Agency Policy/Procedure ADM-11.15, "South Carolina Whistleblower Act" for more information.
- 5.STAFF INTERVENTION: If there is an instance of suspected or actual sexual abuse/victimization the security staff first responder(s) must take the following initial steps:
- •Identify and separate perpetrator and victim (4-4406);
- •Immediately take the victim to Medical;
- •Escort alleged inmate perpetrator(s) to an isolated area, preferably in a dry cell with restricted access to a toilet or water;

- •Notify Shift Supervisor, PREA Compliance Manager, Warden, as well as Investigations;
- •Isolate any witnesses;
- •Secure the crime scene;
- •Document all incidents promptly on SCDC Form 19-29, "Incident Report"; and
- •Only share information related to the incident with those people who need to know in order to ensure the victim's safety, conduct the investigation, or provide treatment to the victim or alleged perpetrator.
- 6. INVESTIGATIONS OF SEXUAL ABUSE AND SEXUAL HARASSMENT:
- 6.1 All allegations of sexual abuseand sexual harassment, including threats and attempts, will be immediately and aggressively investigated. The Division of Investigations shall initiate the investigation, will notifySouth Carolina Law Enforcement Division (SLED) and the Inspector General's office when sexual misconduct by staff, contractors or volunteers is alleged, and will conduct an internal investigation in accordance with SCDC Policy/Procedure GA-05.01, "Investigations."
- 6.2 Collection of forensic and other physical evidence will be done in coordination with the facility's medical staff, the Division of Investigations and/or the South Carolina Law Enforcement Division.
- 6.3 If allegations of conduct that appears to be criminal are substantiated, referral will be made to the appropriate solicitor for prosecution. Additionally, staff will be subject to Agency corrective action up to and including termination, and inmates may be charged through the Agency Disciplinary System.
- 6.4 For further procedures in response to allegations of sexual abuse, see the Sexual Abuse Response Protocol (Attachment A), and SCDC Sexual Abuse Response Checklist (Attachment B).
- 6.5 Evidence/Security Procedures: If there is evidence that a sexual assault has occurred, the area will be treated as a possible crime scene and the following steps will be implemented immediately upon discovery:

  •Identify and maintain the crime scene, preserve evidence, including on the victim's and alleged perpetrator's

bodies or clothes, and maintain custody of evidence until released to law enforcement officials;

- •Items shall not be cleaned or removed:
- •Photos shall be taken of the suspected crime scene and any evidence;
- •Allow only authorized personnel to enter the area; and
- •If the incident occurred within the last 5 days, request that the victim and ensure that the alleged perpetrator(s) refrain from actions that could destroy evidence, such as bathing, brushing teeth, changing their clothes, urinating, defecting, drinking, or eating until they have been examined by qualified medical

personnel.

- •Ensure that any alleged staff, volunteer or contractor perpetrators are immediately separated from contact with inmates.
- •For additional procedures, see the Sexual Abuse Response Protocol.

#### 7. TREATMENT FOR VICTIMS:

- 7.1All alleged inmate victims will be taken to the Medical Services Area for an initial medical assessment. If medical personnel determine that a sexual assault may haveoccurred, the inmate will be taken to an outside medical facility. The outside medical facility will perform a medical forensic exam, as appropriate, collecting all evidence and maintaining the chain of custody to preserve the evidence. (4-4406)
- 7.2 Victim Support: An individual treatment plan shall be developed and initiated for each victim of sexual abuse to address post traumatic stress resulting from the sexual abuse. The treatment plan shall include, at a minimum, mental health counseling, medical follow up (i.e., baseline testing for infectious diseases, etc.). In the case of female inmates, a pregnancy test as appropriate will be completed. (4-4406)
- 7.3 Victims of sexual abuse shall be kept separate from their perpetrators by means of a separation profile in accordance with SCDC Policy/Procedure OP-21.04, "Inmate Classification Plan."

#### 8. PERPETRATOR TREATMENT PLAN:

- 8.1 An individual treatment plan shall be developed and initiated for each sexual perpetrator in order to decrease the individual's potential for continued sexual abuse within the correctional environment and after release to the community. The treatment plan shall include, at a minimum, a sex offender assessment and possible participation in sex offender programming.
- 8.2 For further procedures in response to allegations of sexual abuse, see the Sexual Abuse Response Protocol.

# 9. DATA COLLECTION/TRACKING:

- 9.1 Case Records: All case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings and recommendations for post-release treatment and/or counseling are retained in accordance with OP-21.09, "Inmate Records" and HS-18.07 "Inmate Health Information".(4-4281-8)
- 9.2The PREA Coordinator will be responsible for compiling records and reporting statistical data to the Federal Bureau of Justice as required by PREA of 2003.

#### 10. DEFINITIONS:

Sexual abuse includes--

(1) Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident; and (2) Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer.

Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- 1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- 2. Contact between the mouth and the penis, vulva, or anus;
- 3. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- 4. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

- 1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- 2. Contact between the mouth and the penis, vulva, or anus;
- 3. Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 4. Penetration of the anal or genital opening, however, slight, by a hand, finger, object, or other instrument, that is unrelated to the official duties or where the staff member, contractor or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 5. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- 6. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)-(5) of this section;

7. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and

8. Voyeurism by a staff member, contractor, or volunteer.

Voyeurism by a staff member, contractor, or volunteer means an invasion of privacy of an inmate, detainee, or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.

Sexual harassment includes--

(1) Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate, detainee, or resident directed toward another; and

(2) Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

Consensual sexual contact among inmates is prohibited, and will be referred through the Inmate Disciplinary System. However, non-coercive sexual activity between inmates does not constitute sexual abuse and the Agency may not deem it as such. It is thus beyond the scope of this policy.

SIGNATURE ON FILE

s/Bryan P. Stirling, Director

ORIGINAL SIGNED COPY MAINTAINED IN THE OFFICE OF POLICY DEVELOPMENT.

ATTACHMENT A

SCDC SEXUAL ABUSE RESPONSE CHECKLIST1

# I. Checklists for Sexual Abuse or Attempted Sexual Abuse (security staff first at the scene):

A. If the abuse occurred WITHIN the past five (5) days (120 hours)2:

Separate survivor and alleged abuser(s).

Place alleged inmate perpetrator(s) in an isolated area OR ensure that any staff, volunteer, or contractor perpetrators are immediately separated from inmates.

Attempt to speak to the survivor privately, where other inmates will not hear.

Notify Shift Supervisor3.

Secure any crime scene(s); preserve it/them until appropriate steps can be taken to collect any evidence. Generally, lock down the area and control inmate movement.

If the survivor appears to have significant injuries, take him/her to Medical. Otherwise ask, "Would you like to go to Medical?" Escort him/her there upon request4.

Ask the survivor if he/she would like to speak to a mental health professional (an agency counselor, qualified (trained) staff support member, or an outside advocate).

Identify and isolate witnesses.

If the assault involved sexual contact 5:

- •advise survivor not to take any actions that could destroy evidence6;
- •place the perpetrator(s) in a dry cell with restricted access to a toilet or water.

Complete SCDC Form 19-29, "Incident Report," and provide it to the institutional PREA Compliance Manager.

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1Please refer to the Sexual Abuse Response Protocol for more detail on carrying out the functions included here.

2In South Carolina, survivor can have evidence collected at a hospital up to 120 hours after a sexual assault.

3The shift supervisor will notify the PREA Compliance Manager, facility Warden, and Investigations, as well as the rape crisis advocate or SCDC staff support member.

4If there is a potential for forensic evidence, it will be necessary for the survivor to go to Medical before being sent to an outside local hospital for forensic evidence collection.

5"Sexual contact" here refers to any physical contact that could leave forensic evidence on the survivor's or perpetrator's body, or at the crime scene.

6Such actions include washing, brushing teeth, changing or washing clothing or bedding, urinating, defecating, drinking or eating. The individual should refrain from doing these things until a forensic examination can be performed.

# B. If the abuse occurred MORE THAN five (5) days ago7: Y/N

Ensure that survivor is safe, separating him/her from the alleged perpetrator(s), if applicable.

Notify Shift Supervisor8.

Secure crime scene, as applicable.

Place alleged abuser, if known, in segregation.

If the survivor appears to have significant injuries, take him/her to Medical. Otherwise ask, "Would you like to go to Medical?" Escort him/her there upon request9.

Ask the survivor if he/she would like to speak to a mental health professional (an agency counselor, qualified (trained) staff support member, or an outside advocate).

Identify any witnesses and arrange for them to speak to an investigator.

| II. Checklists for Sexual Abuse or Attempted Scene):  | Sexual Abuse (non-security staff first at the |
|---|---|
| A. If the abuse occurred WITHIN the past five (5) days10:   | Y/N   |
| Separate the survivor and alleged perpetrator   |   |
| If the assault involved sexual contact, request that the survivor avoid any actions that could destroy physical evidence11. |   |
| Notify security staff.  |   |
| B. If the abuse occurred MORE THAN five (5) days: Notify security staff.  | Y/N   |
| 7See Checklist A above for more detail on carrying or   | ut these functions.                           |
| , ,   |   |

8The shift supervisor will notify the PREA Compliance Manager, facility Warden, and Investigations, as

9If there is a potential for forensic evidence, it will be necessary for the survivor to go to Medical before

well as the rape crisis advocate or SCDC staff support member.

being sent to an outside local hospital for forensic evidence collection.

10See Checklist A above for more detail on carrying out these functions.

Complete SCDC Form 19-29, "Incident Report," and

provide it to the institutional PREA Compliance

Manager.

11Such actions include washing, brushing teeth, changing or washing clothes or bedding, urinating, defecating, drinking or eating. The individual should refrain from doing these things until a forensic examination can be performed.

## ATTACHMENT B

## SCDC SEXUAL ABUSE RESPONSE PROTOCAL

All staff have a duty to respond rapidly, professionally, and thoroughly when an inmate has been sexually victimized. If a staff member receives a report OR knows or suspects that someone has been or may have been sexually abused, threatened with abuse, solicited for sex, or sexually harassed, he or she must act. The duties of the first staff on the scene will vary depending on how much time has passed since the incident occurred, the circumstances of the abuse, and the particular needs of the victimized inmate.

## Guidelines for Talking to the Survivor

Here are some general guidelines for effectively responding to an inmate who may have experienced sexual abuse or harassment:

- •If an inmate or a third party comes to you with a report of sexual abuse or sexual harassment, do not laugh at or make fun of what they are telling you. Avoid appearing shocked, or trying to dismiss or minimize the experience. Remember that it is your duty to take every report seriously.
- •The first staff on the scene must not question anyone about the specifics of the assault or otherwise step into an investigative role. Your role is not to determine what happened or whether the report is legitimatethe investigator will handle that.
- •Understand that there is a difference between questioning a suspect and asking questions to ensure the welfare of the survivor. You will need to seek certain information from the survivor. The first staff on the scene should ask questions along the lines of "Are you injured?" "Do you need medical attention?" "Do you believe you or anyone else is in immediate danger?" These questions are aimed at protecting the immediate safety of the survivor, witnesses, and other inmates and staff.

If the allegation involves a staff member, do not act surprised or try to defend the employee. Be neutral, listen to the allegations or any other information the survivor provides and document the incident as it is told to you.

- •Avoid assumptions about the survivor's experiences based on categories such as sexual orientation, gender identity, race/ethnicity, ability/disability, or level of education.
- •To the extent that you need to gather information about the report or the parties involved, do so in a sensitive, supportive, affirming manner. If you ask the survivor a question, make sure your reason for asking is to help the inmate, not to satisfy your own curiosity. Do not make the inmate feel as if his/her credibility is being questioned.
- •Express your concern for the survivor's safety and take all threats, reports of threats or retaliation, and violence seriously. Directly assess and address any threats of or hints at suicide.
- •If you hear someone joking, spreading misinformation, or making prejudicial comments about the survivor or about sexual abuse in detention in general, take steps to address it.

For Additional Procedures, please see pertinent departmental policies (i.e., investigations, medical/mental health, and human resources).

## II. Staff Intervention

A. A security staff who receives a report(s) of or witnesses sexual abuse

Upon receiving a report of sexual abuse (whether verbal, in writing, anonymously, from a third party, or in some other manner) or otherwise becoming aware that an instance of sexual abuse/victimization has occurred, security staff must take the following initial steps:

- •Identify and separate the survivor and alleged perpetrator(s), as applicable, ensuring that any alleged staff, volunteer or contractor perpetrators are immediately separated from contact with inmates. Place any alleged inmate perpetrator(s) in an isolated area.
- •Attempt to speak to the survivor in a private area (where other inmates will not hear).
- •Notify the Shift Supervisor, who will inform the PREA Compliance Manager, and the Warden, as well as Investigations.

- •If the survivor appears to have significant injuries, take him or her to Medical. Otherwise, ask "Would you like to go to medical?" and escort him or her there upon request.1
- •If the incident occurred within the last 5 days (120 hours) and included sexual contact:2
- •advise survivor not to take any actions that could destroy evidence, such as bathing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating, until they have been examined by qualified medical personnel;
- •the survivor or perpetrator also should not take actions that could destroy other evidence at the scene, such as washing clothing or bedding;3
- •place the perpetrator(s) in a dry cell with restricted access to a toilet or water.
- •Ask the survivor if he or she would like to speak with an agency mental health counselor or qualified (trained) staff support member. If so, immediately contact Mental Health to arrange a private consult either in-person (if possible), by phone or video conference. Alternatively, the survivor has the option of contacting a local victim advocate by phone. In any case, the consult should take place as soon as possible (in cases involving sexual contact within past 5 days, this should ordinarily occur no more than 2 hours after the report is made), so that the survivor can receive crisis intervention and discuss with the counselor any options or decisions that must be made (such as whether to have a forensic medical exam).4

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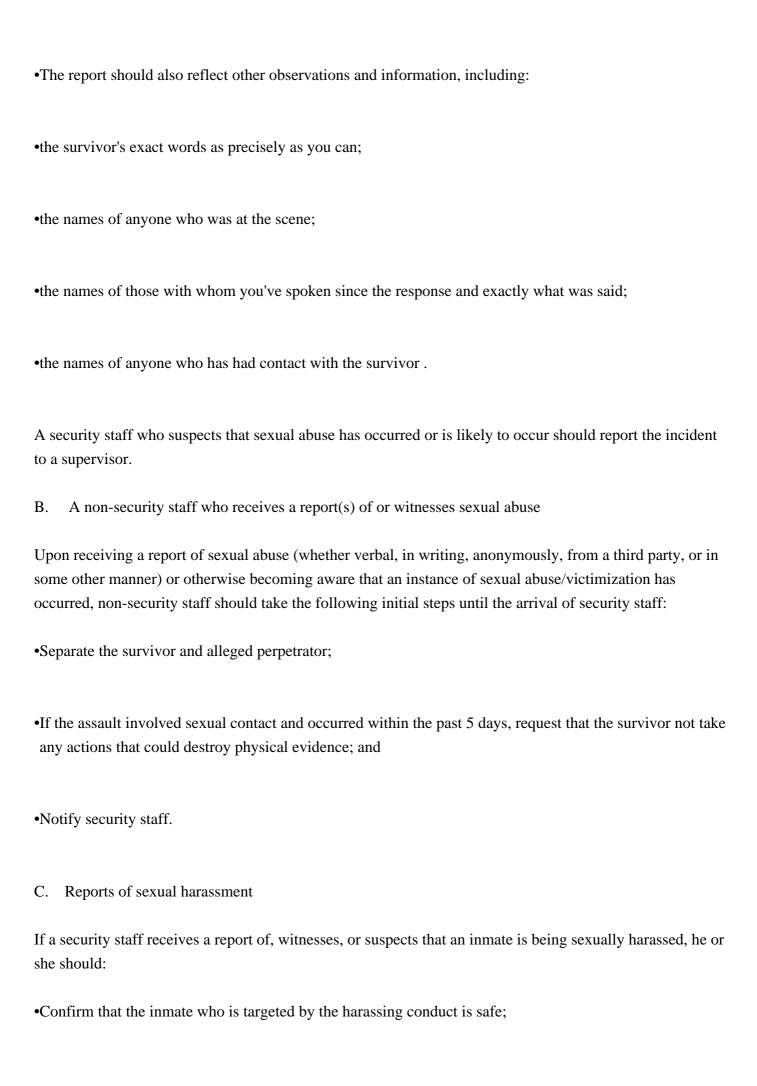
1If there is a potential for forensic evidence, it will be necessary for the survivor to go to Medical before being sent to an outside local hospital for forensic evidence collection.

2"Sexual contact" here refers to any physical contact that could leave forensic evidence on the survivor's or perpetrator's body, or at the crime scene.

3If one of the inmates involved has showered, changed clothes or changed bedding, ask the investigators if they want you to try to collect the clothes, bedding or towels and turn them over to investigators.

4If the survivor is taken to a local hospital, the hospital will contact a local rape crisis center so that an advocate can provide accompaniment to the survivor throughout the forensic examination process and any interviews with investigators, etc. that may take place at the hospital. Once the survivor returns to the

| facility (or if he or she does not go to the hospital), the PREA Compliance Manager will have to ensure that a Mental Health counselor or qualified (trained) staff member is available to support the survivor in the aftermath of the abuse and during any investigatory interviews or other procedures related to the incident to provide emotional support, crisis intervention, information and referrals. |
|---|
| •Identify and isolate any witnesses;  |
| •Preserve and protect any crime scene(s) until appropriate steps can be taken to collect any evidence.  Generally lockdown the area and control inmate movement;  |
| •Document all incidents promptly on SCDC Form 19-29, "Incident Report" and provide it in a timely manner to the institutional PREA Compliance Manager.  |
| •The incident report should reflect your observations at the crime scene, including: •Are there multiple crime scenes?  |
| •Is anything out of place in those areas?   |
| •Are there any objects of note such as bedding or clothing?   |
| •Are there suspicious items on the floor?   |
| •Are there puddles or stains?   |
| •What time is it?   |
| •Are the lights on or off in the area?  |
| •Are there any obviously missing items?   |
| •What do areas leading into and out of the area look like?  |



| •File an incident report;   |
|---|
| •Report the incident or information to a supervisor, who should offer to make a referral to Mental Health for the targeted inmate.  |
| Additional Guidelines   |
| •Make yourself approachable. Your body language can be as strong as your choice of words. "Folding your arms may communicate that you're closed to what the victim has to tell you; standing over the person can be intimidating" National Institute of Corrections. (2010, May). Your Role: Responding to Sexual Abuse. National Institute of Corrections. |
| •Only share information related to the incident with those people who need to ensure the survivor's safety, conduct the investigation, or provide treatment to the survivor or alleged perpetrator.   |
| •Take appropriate steps in cases where a survivor, perpetrator or witness is not proficient in English or where there are other limitations on an involved individual's capacity to communicate with staff. Do not use another inmate to interpret for the survivor.  |
| •All mental health and medical care for inmates who have been sexually victimized, including forensic evidence exams, must be provided without regard to whether the inmate names the perpetrator(s) or cooperates in any investigation.  |